UNITED STATES DISTRICT COUR	Т	
SOUTHERN DISTRICT OF NEW Y	ORK	
	X	
UNITED STATES OF AMERICA		
-V-		WAIVER OF RIGHT TO BE PRESENT AT CRIMINAL PROCEEDING
BENTLEY HATCHETT,		13-CR-634 (LTS)
De	efendant.	, ,
	X	
Check Proceeding that Applies		

X Entry of Plea of Guilty

I am aware that I have been charged with violations of federal law. I have consulted with my attorney about those charges. I have decided that I wish to enter a plea of guilty to certain charges. I understand I have a right to appear before a judge in a courtroom in the Southern District of New York to enter my plea of guilty and to have my attorney beside me as I do. I am also aware that the public health emergency created by the COVID-19 pandemic has interfered with travel and restricted access to the federal courthouse. I have discussed these issues with my attorney. By signing this document, I wish to advise the court that I willingly give up my right to appear in person before the judge to enter a plea of guilty. By signing this document, I also wish to advise the court that I willingly give up any right I might have to have my attorney next to me as I enter my plea so long as the following conditions are met. I want my attorney to be able to participate in the proceeding and to be able to speak on my behalf during the proceeding. I also want the ability to speak privately with my attorney at any time during the proceeding if I wish to do so.

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Date: <b>4-1</b>	6-21	Bentley Hatchett	Bentley Hatchett, by:
	ı	Print Name	Signature of Defendant
So	entenc	e	
D to ci fe l p ju th Ye th	o the jace of the jace of the time also verse	of New York at the time of my udge who will sentence me. I by the COVID-19 pandemic has courthouse. I do not wish to wadiscussed these issues with me, at the time my sentence is imple ho will impose that sentence. Entitlingly give up my right to appear my sentencing proceeding as we of sentencing on the following ate in the proceeding and to be	ear before a judge in a courtroom in the Southern sentence and to speak directly in that courtroom am also aware that the public health emergency interfered with travel and restricted access to the ait until the end of this emergency to be sentenced. By attorney and willingly give up my right to be posed, in the courtroom with my attorney and the By signing this document, I wish to advise the court ear in a courtroom in the Southern District of New well as my right to have my attorney next to me at an geonditions. I want my attorney to be able to a able to speak on my behalf at the proceeding. Fately with my attorney at any time during the
Date:	-		
	ı	Print Name	Signature of Defendant

I hereby affirm that I am aware of my obligation to discuss with my client the charges against my client, my client's rights to attend and participate in the criminal proceedings encompassed by this waiver, and this waiver and consent form. I affirm that my client knowingly and voluntarily consents to the proceedings being held with my client and me both participating remotely.

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Date:	Barry Zone	
	Print Name	Signature of Defense Counsel
Addendum fo	or a defendant who requires serv	ices of an interpreter:
also translate		these issues with the defendant. The interpreter the defendant signed it.
Date:		
	Signature of Defense Counsel	
Accepted:	/s/ Laura Taylor Swain	
	Signature of Judge	
	Date: 4/16/2021	